		(									,	
								10/	64	28	90	_
							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOIL Effective January 1, 2003							10 Q76939					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
AL CLAIMS		10					RATE	FEE	].	RATE	FEE	
		NUMBER FILEO		NUMBER EXTRA			BASIC FI	EE 375.00	OR	BASIC FEE	750.00	
AL CHARGEABLE CLAIMS		// minus 20=		· A			X\$ 9=		OR	X\$18=		
PENDENT CLAIMS		2 minus 3 =		6			X42=		OR	X84≃		
TIPLE DEPEN	IDENT CLAIM PI	RESENT				+140=			OR	+280=		
ne difference in column 1 is less than zero, enter "0" in column 2							TOTAL	-	OR	TOTAL	750.	ro
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALI	L ENTITY	OR	OTHER SMALL	THAN	
	REMAINING		- HIGH NUM		PRESENT			ADDI-	1		ADDI-	٠.
	AFTER AMENDMENT		PREVIO PAID		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
otal	. 18	Minus	* 2	20	= /		X\$ 9=	,	OR	X\$18=		
ndependent	<u>* 3</u>	Minus	***	3	* /		X42=		OFI	X84=		l
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	/	
) 1.	Α		-			,i	TOTA		ОЯ	TOTAL ADDIT, FEE	1	
30/02	(Column 1)		(Colur		(Column 3)			-	•			
	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
otal	·10	Minus	**		8	]	X\$ 9=	1	ОЯ	X\$18=		
ndependent	· Change	Minus	***		8		X42=		OR	X84=		
IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							(140	<del> </del>		+280=		
							+140=		OR	TOTAL		
							ADDIT. FEI		JOR	ADDIT. FEE		•

## AMENDMENT B PAID FOR AMENOMENT Total Minus Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST O NUMBER

PREVIOUSLY

PAID FOR

PRESENT

**EXTRA** 

\* If the difference in column 1 is less than zero, enter "0" in column 2

**TOTAL CLAIMS** 

TOTAL CHARGEABLE CLAIMS

MULTIPLE DEPENDENT CLAIM PRESENT

REMAINING

AFTER

AMENDMENT

INDEPENDENT CLAIMS

FOR

**AMENDMENT A** 

AMENDMENT

Total

Independent

Total

Independent

ADDI-ADDI-RATE TIONAL RATE TIONAL FEE FEE X\$ 9= X\$18= OR X42= X84= OR +140= +280= OR TOTAL OR

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Minus

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT. FEE

ADDIT. FEE